

12/31/2007 00:33	16414238898	Cerv Lorpage 02/05
File with: lowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE	2070EC31 P1.12:59
COMMITTEE NAME (Must be	e same as on Statement of Organization)	7/1/2:50
Tomquist For City Council		FORM
(4) County Central Committee ()	of committee you are reporting for: 6 Standing for Retention Candidate (2)State PAC (3)State Party 5)County Candidate (6)City Candidate (7)School Board or Other Polit ty PAC (9)City PAC (10)School Board or Other Political Subdivision P	- DR-2 DISCLOSURE REPORT
CANDIDATE COMMITTEES Candidate Name Scott Tornquist	ONLY: Political Party (if applicable	Logged in
Office Sought City Council	District (if Senate or House	· · · · · · · · · · · · · · · · · · ·
SIGNATURE OF PERSON FILL I AM FILING A 12/31/07	REPORT FOR (1) ELECTION	DATE SIGNED ON /(2)MON-ELECTION YEAR.
	part date) Indicate b	yy # [<u>2_</u>]
MODECK IF AMENDMENT TO	D REPORT DATED	Local Committees, enter Date of Election
Check if this is final (termina (You must continue to	tion) report and attach Notice of Dissolution Form DR-3. file reports until a DR-3 is filed.)	County & Local Committees, enter County in which Election is held
STATEM	ENT OF CASH ON HAND	
committee. This amou	ing of the reporting period. (Total of all funds held by the unt MUST be the same as the cash on hand at the end eriod or must be zero if this is first report filed.)	
	TAKEN IN THIS PERIOD	
	ontributions total (Attach Schedule A) (*also see in-kind below)	
	eceived total (Attach Schedule F)	
	les of Campaign Property (Attach Schedule H)	
(Schedule H	applies to Candidates' Committees Only)	2,241.12
SUBTRACT TOTAL A	SUB-TOTAL NONEY SPENT THIS PERIOD	
	noner Spent 1 his Period ures total (Attach Schedule B) (**also see debts and loans below	2,241.12
	payments total (Attach Schedule F)	V)
	this reporting period (if final report balance must be zero)	
WUNPAID BILLS (From Schedu	ıle D - Attach Schedule D)	\$
	rom Schedule E - Attach Schedule E)	
	m Schedule F - Attach Schedule F)	
CONSULTANT BREAKDOWN		, YES NO
CANDIDATE COMMITTEES OF		
VALUE OF CAMPAIGN PROPE	ERTY (From Schedule H - Attach Schedule H)	\$
	a reconciled campaign account bank statement in January of ea	

For Instructions, See Back of Form

English provided the second

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Tornquist For City Council

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIF FOR FUND- RAISER INCOME
	ID#	Unitemized			110000
various	CK#	Cintemized		\$14.74	L
	ID#				
	CK#				
	ID#				<u> </u>
	CK#				<u> </u>
	1D#				
	CK#				
	ID#				
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	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
•	CK#				
	ID#				
	CK#				
		L	SUB-TOTAL	\$ 14.74	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

14.74

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be san	ne as on Statement of Organization)
Tornquist For City Council	

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/19/07	ID# CK#1008	Citizens for Tornquist	Donation to State Campaign Fund for Scott Tornquist	\$ 2241.12
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	CK#	·		
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	L		.L. SUB-TOTAL	\$ 2241.12

TOTAL (if last page of this schedule)

\$ 2241.12

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persona/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 68A.402(3)(i).)

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